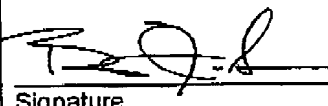
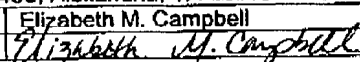


JUN 25 2004

TRANSMITTAL FORM		Application Number		10/624,164			
		Filing Date		July 21, 2003			
		First Named Inventor		Omar J. Fakhoury			
		Art Unit		3617			
		Examiner Name		Russell D. Stormer			
Total Number of Pages in This Submission		8		Attorney Docket Number		205017-9004	
ENCLOSURES (check all that apply)				PETITION FOR EXTENSION OF TIME			
<input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> Before Final <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form(s) <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Status Letter <input type="checkbox"/> Other:				This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. <input type="checkbox"/> Applicant(s) claims small entity status under 37 CFR 1.27. <input checked="" type="checkbox"/> Applicant(s) petitions for a two-month extension of time and pay the fee of \$420.00 (37 CFR 1.17(a)(1)-(5)). <input type="checkbox"/> Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.			
CLAIMS FEES							
<input checked="" type="checkbox"/> No additional claim fee is required.							
				Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate
Total	20	-	20	=0	x 9=	\$	x 18= \$0
Independent	4	-	3	=0	x 43=	\$	x 86= \$86.00
<input type="checkbox"/> First Presentation of Multiple Claim					+ 145=	\$	+ 290= \$0
FEES							
<input checked="" type="checkbox"/> Additional Claim Fee						\$86.00	
<input checked="" type="checkbox"/> Extension fee for two-month						\$420.00	
<input type="checkbox"/> Information Disclosure Statement						\$0.00	
<input type="checkbox"/> Surcharge for Missing Parts - Declaration						\$0.00	
<input type="checkbox"/> Terminal Disclaimer						\$0.00	
TOTAL FEES						\$506.00	
PAYMENT OF FEES							
<input type="checkbox"/> A check in the amount of \$ is enclosed.							
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.							
<input checked="" type="checkbox"/> The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$506.00.							
SIGNATURE OF ATTORNEY							
Brian J. Lum, Reg. No. 54,282 MICHAEL BEST & FRIEDRICH, LLP 401 North Michigan Avenue Suite 1900 Chicago, Illinois 60611 Telephone: (312) 222-0800 Facsimile: (312) 222-0818				 Signature Date: 6/25/04			
CERTIFICATE OF TRANSMISSION/MAILING							
I hereby certify that this correspondence is:							
<input checked="" type="checkbox"/> being facsimile transmitted to the USPTO, facsimile number (703) 872-9306.							
<input type="checkbox"/> deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below							
Typed or printed name				Elizabeth M. Campbell		Date: 6/25/04	
Signature							

S:\client\205017\9004\IC0389881.1

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CENTRAL FAX CENTER
JUN 25 2004

Attorney Docket No. 205017-9004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Omar J. Fakhoury

Application No. 10/624,164

Filed: July 21, 2003

For: "OUTBOARD RIBBED WHEEL HUB"

Art Unit: 3617

Examiner: Russell D. Stormer

Confirmation No. 6360

I, Elizabeth M. Campbell, hereby certify that this
correspondence is being transmitted via facsimile to
Commissioner for Patents, P.O. Box 1450, Alexandria, VA
22313-1450, facsimile number (703) 872-9306 on
6-25-04.

Elizabeth M. Campbell
Signature

6/25/2004
Date of Signature

OFFICIAL

RESPONSE TO OFFICE ACTION OF FEBRUARY 2, 2004

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of February 2, 2004, please amend the application as follows:

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 3 of this paper.